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TATI AHASSEE, FLORIO

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COVER LETTER

TO: Amendment Section Division of Corporation	ns		
SUBJECT.	AFWE-THRILL!	FR CORP	
SUBJECT:	Name of Co		
DOCUMENT NUMBER:	P100	000019148	
The enclosed Statement of Cha	ange of Registered Office	Agent and fee are subm	itted for filing.
Please return all corresponden	ce concerning this matter	to the following:	
	Matthew E. N	Morrall, Esq.	
	Name of Cor	ntact Person	·
	Matthew E. N	Morrall, P.A.	
	Firm/Co	mpany	
·	2050 N. A. J.		
	2850 N. Andr Addi		
	Addi	C33	
		EL 00044 0544	
	Fort Lauderdale, City/State an	d Zip Code	
E mail ad	morrall@bel	lsouth.net iture annual report not	ification)
E-man ad	iress. (to be used for it	iture aimuai report not	incation)
For further information concer	ning this matter, please c	all:	
Matthew E.	Morrall	at (954)	563-4005
Name of Conta	ct Person	Area Code & Days	563-4005 time Telephone Number
Enclosed is a \$35.00 check ma	de payable to the Depart	ment of State.	
<u>Maili</u>	ng Address: Idment Section	Street Address Amendment S	Si Vantian
Amer		Amendment S Division of C	
Office All Brown P.O. I	30x 6327	Clifton Build	•
	nassee, FL 32314	2661 Executi	ve Center Circle
The state of the same and the same	The second secon	Tallahassee, I	FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida ir to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: AFWE-THRILLER CORP.
2. The principal	office address: 401 Biscayne Blvd. (Dock Thriller)
	Miami, FL 33132
3. The mailing a	address (if different): P.O. Box 350564
	Fort Lauderdale, FL 33335
4. Date of incorp	poration/qualification: 3/3/10 Document number: P10000019148
	d street address of the current registered agent and registered office on file with the truent of State: (If resigned, enter resigned)
	BIMIAMI LLC
	3400 Pan American Drive
	Coconut Grove, FL 33133
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Thriller Miami LLC
	401 Biscayne Blvd. (Dock - Thriller)
	P.O. Box NOT acceptable
	Miami, FL 33132
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Signatur	Charles Keith, Manager, C.K. YACHTS, ±nc
I further agree to of my duties, and document is bei	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this Ing filed merely to reflect a change in the registered office address, I hereby confirm that the I been notified in writing of this change.
TWI	November 1, 2010
_	nature of Registered Agent Date
If signing on be	half of an entity:
ту	Charles Keith yed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *